



**NH Department of Safety  
Division of Motor Vehicles  
Stephen E. Merrill Building  
23 Hazen Drive, Concord NH 03305**

Richard M. Flynn  
Commissioner of Safety

Virginia C. Beecher  
Director of Motor Vehicles

## RECORD CHANGE REQUEST

1. INDICATE CHANGE DESIRED: ☐ Name ☐ Address ☐ Both ☐ Other

To change name, date of birth, sex, social security number or FEID, please submit this card with appropriate official supporting documents.

2. **PRINT OR TYPE** INFORMATION AS IT **NOW** APPEARS ON YOUR CURRENT DOCUMENTS:

Name (Last, First, MI):	Social Security or FEID
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Mailing Address:	Town/City:	State:	Zip:
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Legal Address:	Town/City:	State:	Zip:
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Height	Weight	Eye Color	Hair Color	Sex	Date of Birth
					Mo. Day Year

3. **PRINT OR TYPE ONLY NEW OR CHANGED** INFORMATION: (Note that this request will change data on all Divisional records (Registration, Driver License, Title, etc.) and should be filed for **permanent** changes only.)

Name (Last, First, MI):	Social Security or FEID
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Mailing Address:	Town/City:	State:	Zip:
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Legal Address:	Town/City:	State:	Zip:
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Height	Weight	Eye Color	Hair Color	Sex	Date of Birth
					Mo. Day Year

REASON FOR CHANGE:
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SIGNATURE: \_\_\_\_\_

(Signed under penalty of unsworn falsification pursuant to RSA 641:3)

DATE: \_\_\_\_\_